

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115971

Entity Name: ACKERMAN-WALDEN, INC.

FILED
Feb 13, 2009
Secretary of State

Current Principal Place of Business:

24311 WALDEN CENTER DRIVE
STE 300
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

24311 WALDEN CENTER DRIVE
STE 300
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 20-1491822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ACKERMAN, DON E
24311 WALDEN CENTER DR
STE 300
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: ACKERMAN, DON E
Address: 24311 WALDEN CENTER DR STE 300
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: VPD () Delete
Name: ACKERMAN, MICHAEL A
Address: 15 CHERRY HILLS PARK DR
City-St-Zip: CHERRY HILLS VILLAGE, CO 80113 US

Title: D () Delete
Name: ACKERMAN, VIRGINIA J
Address: 8477 BAY COLONY DR, UNIT 501
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON E. ACKERMAN

PRES

02/13/2009

Electronic Signature of Signing Officer or Director

_____ Date